

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MADISON PROJECT INC.

ADDRESS (number and street) ▼

PO BOX 15179

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00298000

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
04 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
04 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer PAUL A KILGORE

Signature of Treasurer

PAUL A KILGORE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
05 20 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MADISON PROJECT INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
04		30		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div>Y Y Y Y Y 2014</div>		<div>252316.87</div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div>152617.41</div>	
(c) Total Receipts (from Line 19) .....	<div>234330.08</div>	<div>1088630.65</div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div>386947.49</div>	<div>1340947.52</div>
7. Total Disbursements (from Line 31).....	<div>236155.99</div>	<div>1190156.02</div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div>150791.50</div>	<div>150791.50</div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div>0.00</div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**MADISON PROJECT INC.**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2014

To:

M M	/	D D	/	Y Y Y Y
04		30		2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

86591.17

275310.67

(ii) Unitemized .....

129620.20

741000.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

216211.37

1016311.17

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

1500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

216211.37

1017811.17

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

18118.71

44322.04

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

26497.44

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

234330.08

1088630.65

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

234330.08

1088630.65

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	199954.64	1124392.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	199954.64	1124392.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29590.00	55900.00
24. Independent Expenditures (use Schedule E) .....	5611.35	8863.20
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1000.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	236155.99	1190156.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	236155.99	1190156.02

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	216211.37	1017811.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	216211.37	1017811.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	199954.64	1124392.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	18118.71	44322.04
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	181835.93	1080070.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 160

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MRS LILIAN ABBOTT**

Mailing Address 19618 OLD GALVESTON RD

City	State	Zip Code
WEBSTER	TX	77598

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2014

Transaction ID : SA11AI.276104

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ROBERT AITKEN**

Mailing Address 15619 GETTYSBURG DR

City	State	Zip Code
TOMBALL	TX	77377

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : SA11AI.272900

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. TED ALBRECHT**

Mailing Address 2510 LAKE MICHIGAN DR NW APT E105

City	State	Zip Code
GRAND RAPIDS	MI	49504

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2014

Transaction ID : SA11AI.274494

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

650.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 160

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. RUTH ALLEN**

Mailing Address 345 W 2ND AVE

City  
GARNETT

State Zip Code  
KS 66032

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SA11AI.274618

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. ALTON ALMQUIST**

Mailing Address 3942 COWELL BLVD

City  
DAVIS

State Zip Code  
CA 95618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274810

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. TED AMSBAUGH**

Mailing Address 1302 24TH ST W # 329

City  
BILLINGS

State Zip Code  
MT 59102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.274472

Amount of Each Receipt this Period

151.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

271.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 160

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. ALFRED ANGELINO**

Mailing Address 2430 DUNLAP AVE

City  
GILROY

State Zip Code  
CA 95020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SA11AI.274710

Amount of Each Receipt this Period

360.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL ARMSTRONG**

Mailing Address 7333 TANAQUA LN

City  
AUSTIN

State Zip Code  
TX 78739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SA11AI.275432

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. ARLIN ASHMEAD**

Mailing Address PO BOX 346

City  
FAIRFIELD

State Zip Code  
ID 83327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2014

Transaction ID : SA11AI.275948

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

565.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MYRA ASPLUNDH**

Mailing Address PO BOX 11

City

BRYN ATHYN

State

PA

Zip Code

19009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : SA11AI.272925**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. NANCY BAKER**

Mailing Address 15610 LOS ALTOS DR

City

HACIENDA HEIGHTS

State

CA

Zip Code

91745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA11AI.275008**

Amount of Each Receipt this Period

117.00

Full Name (Last, First, Middle Initial)

**C. NANCY BAKER**

Mailing Address 15610 LOS ALTOS DR

City

HACIENDA HEIGHTS

State

CA

Zip Code

91745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

**Transaction ID : SA11AI.275009**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

317.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 160

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. CAROLYN BARTHOLOMA

Mailing Address 5717 W LEIBER PL

City  
GLENDALE

State Zip Code  
AZ 85310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		07		2014

Transaction ID : SA11AI.274794

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. MS. BEBE BAYNHAM

Mailing Address 30100 BENNY KING RD.

City  
FRANKLINTON

State Zip Code  
LA 70438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		18		2014

Transaction ID : SA11AI.280351

Amount of Each Receipt this Period

100.00

EM/MANESS/TRANS04242014

Full Name (Last, First, Middle Initial)

C. HENRY BETHEA

Mailing Address 92 HOLLYMEAD DR

City  
THE WOODLANDS

State Zip Code  
TX 77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		08		2014

Transaction ID : SA11AI.275595

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 160

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ROBERT BLEDSOE**

Mailing Address S5240 DAMAR PRIVATE DR

City

EAU CLAIRE

State

WI

Zip Code

54701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SA11AI.275736**

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

## **B. MRS. PATTY BLEVINS**

Mailing Address 275 N COMBS LN

City

FOUNTAIN RUN

State

KY

Zip Code

42133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

**Transaction ID : SA11AI.280332**

Amount of Each Receipt this Period

25.00

EM/MCDANIEL/TRANS04102014

Full Name (Last, First, Middle Initial)

## **C. DON BOGGUS**

Mailing Address 3603 POINT CLEAR

City

MISSOURI CITY

State

TX

Zip Code

77459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2014

**Transaction ID : SA11AI.280352**

Amount of Each Receipt this Period

100.00

EM/MANESS/TRANS04242014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. LOIS BOOTH**

Mailing Address PO BOX 389

City  
AULT

State  
CO

Zip Code  
80610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.274995

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. JULIE BOSTWICK**

Mailing Address 5819 N VISTA LN

City

SPOKANE

State

WA

Zip Code

99212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.273768

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. BERNICE BOUCHER**

Mailing Address 4585 N SAWYER RD

City

OCONOMOWOC

State

WI

Zip Code

53066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SA11AI.272886

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. JACQUELINE BOWE**

Mailing Address 1 BISHOP GADSDEN WAY APT 314

City State Zip Code  
CHARLESTON SC 29412

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

**Transaction ID : SA11AI.272813**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

## **B. GREGORY BOXOLD**

Mailing Address 838 KAAHUE ST

City State Zip Code  
HONOLULU HI 96825

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UBS FIANCIAL SERVICES

Occupation

FINANCIAL ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.273945**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. PETER BRADY**

Mailing Address 36 IRVING ST

City State Zip Code  
BETHPAGE NY 11714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2014

**Transaction ID : SA11AI.275181**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ROBERT BRAMER**

Mailing Address 1052 VIRGINIA DR

City  
ALDEN

State  
NY

Zip Code  
14004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SA11AI.272647

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. SPENCER BRAND**

Mailing Address 4010 MILLCREEK DR

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SA11AI.280349

Amount of Each Receipt this Period

50.00

EM/LOUDERMILK/TRANS04302014

Full Name (Last, First, Middle Initial)

## **C. CHARLIE BRICKETT**

Mailing Address 4 BOWSPRIT LN

City

SALEM

State

SC

Zip Code

29676

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.274072

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

670.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM BRISTOR**

Mailing Address 3621 BLUE HILL CT

City

ELLICOTT CITY

State

MD

Zip Code

21042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274808

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. JAMES BROOKS**

Mailing Address 4320 NE 261ST AVE

City

CAMAS

State

WA

Zip Code

98607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.275658

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. RICHARD BROWN**

Mailing Address PO BOX 1409

City

GOLDTHWAITE

State

TX

Zip Code

76844

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.274764

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

725.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. WENDELL BROWN**

Mailing Address 300 N FILLMORE ST

City  
ARLINGTON

State Zip Code  
VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

04 / 24 / 2014

Transaction ID : SA11AI.272888

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. MABEL BROWN**

Mailing Address 115 N STATE ST

City  
GENESEO

State Zip Code  
IL 61254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

04 / 25 / 2014

Transaction ID : SA11AI.272630

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

## **C. MARY BUERGER**

Mailing Address 115 STONY RIDGE CT

City  
HILLSDALE

State Zip Code  
MI 49242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 26 / 2014

Transaction ID : SA11AI.280350

Amount of Each Receipt this Period

200.00

EM/LOUDERMILK/TRANS04302014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

525.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM G BURNS**

Mailing Address 13493 COLISEUM DR.

City  
CHESTERFIELD

State Zip Code  
MO 63017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FILTRATION TECHNOLOGIES

Occupation  
PRODUCT DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 24 / 2014

Transaction ID : SA11AI.280348

Amount of Each Receipt this Period

20.00

EM/LOUDERMILK/TRANS04302014

Full Name (Last, First, Middle Initial)

## **B. RUTH BURROWS**

Mailing Address 47 STONERIDGE RD

City  
PONCA CITY

State Zip Code  
OK 74604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.272643

Amount of Each Receipt this Period

345.00

Full Name (Last, First, Middle Initial)

## **C. CHARLES BURT**

Mailing Address 8S041 CREEK DR

City  
NAPERVILLE

State Zip Code  
IL 60540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C. T. BURT SALES

Occupation  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.274352

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

665.00

**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR JOSEPH M BUTLER**

Mailing Address PO BOX 485

City

JACKSONVILLE

State

OR

Zip Code

97530

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 04 / 25 / 2014

Transaction ID : SA11AI.275695

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. CHARLOTTE CALLEN**

Mailing Address 1139 SHORELINE LN

City

WINTER HAVEN

State

FL

Zip Code

33884

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 04 / 04 / 2014

Transaction ID : SA11AI.272252

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL CASEY**

Mailing Address 2396 N 1350 E

City

OGDEN

State

UT

Zip Code

84414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 04 / 10 / 2014

Transaction ID : SA11AI.280353

Amount of Each Receipt this Period

25.00

EM/MATHIS/TRANS04162014

SUBTOTAL of Receipts This Page (optional)..... ►

425.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. JOHN CERVIN**

Mailing Address 815A HILLTOP AVE EXT

City

ABINGDON

State

MD

Zip Code

21009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.274239

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

## **B. CHARLES CHALFIN**

Mailing Address 5103 PATTI JO DR

City

CARMICHAEL

State

CA

Zip Code

95608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274396

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. CLARO CHEN**

Mailing Address PO BOX 2105

City

WALNUT

State

CA

Zip Code

91788

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DHS

Occupation

FEDERAL EMPLOYEE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 13 / 2014

Transaction ID : SA11AI.280359

Amount of Each Receipt this Period

20.00

EM/MATHIS/TRANS04162014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

385.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DARYL CHESTERMAN**

Mailing Address PO BOX 997

City  
ROYAL CITY

State Zip Code  
WA 99357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PARTS CITY INC.

Occupation

AUTO PARTS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.273645

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. DARYL CHESTERMAN**

Mailing Address PO BOX 997

City  
ROYAL CITY

State Zip Code  
WA 99357

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PARTS CITY INC.

Occupation

AUTO PARTS SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 25 / 2014

Transaction ID : SA11AI.273646

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. WAYNE CLARK**

Mailing Address 400 BAY WAY

City  
SAN RAFAEL

State Zip Code  
CA 94901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 15 / 2014

Transaction ID : SA11AI.275947

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MELBA CLARK**

Mailing Address 1412 PORTO BELLO CT

City

ARLINGTON

State

TX

Zip Code

76012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SA11AI.275275

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. ANDREW CLARKE**

Mailing Address 4767 MARSH HAMMOCK DR E

City

JACKSONVILLE

State

FL

Zip Code

32224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.273390

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. MARY COLWELL**

Mailing Address 140 MARICOPA CIR

City

ENON

State

OH

Zip Code

45323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.273108

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MR MARK CONLEY**

Mailing Address 16349 TUDOR DR

City  
ENCINO

State Zip Code  
CA 91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KATTEN MUCHIN ROSENMAN LLP

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2014

Transaction ID : SA11AI.272456

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. JOHN CREEDON**

Mailing Address 200 PARK AVE FL 40

City  
NEW YORK

State Zip Code  
NY 10166

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2014

Transaction ID : SA11AI.272614

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

## **C. H CRIM**

Mailing Address 2653 PADEN PL

City  
VESTAVIA

State Zip Code  
AL 35226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.274900

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR CHARLES R CRISP JR**

Mailing Address 1764 TALLOKAS RD

City

MOULTRIE

State

GA

Zip Code

31768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.274709

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. BYRON CROCKER**

Mailing Address 2025 HANOVER CIR

City

BEAUMONT

State

TX

Zip Code

77706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.273642

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. FREDRICK CULLER**

Mailing Address PO BOX 676

City

VAN WERT

State

OH

Zip Code

45891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SA11AI.273226

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. STAN CULVER**

Mailing Address 4801 BONITA BAY BLVD

City State Zip Code  
 BONITA SPRINGS FL 34134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 25 / 2014

Transaction ID : SA11AI.274182

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. WILLIAM CURRAN**

Mailing Address 401 TEMPLE ST

City State Zip Code  
 NEW HAVEN CT 06511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 08 / 2014

Transaction ID : SA11AI.272845

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. RADCLIFFE DALY**

Mailing Address 56 CONSTITUTION DR APT C1

City State Zip Code  
 GILLETTE WY 82716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 04 / 2014

Transaction ID : SA11AI.274247

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

830.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. LESLIE DANIELS**

Mailing Address 3 HARTURA PT

City

HOT SPRINGS

State

AR

Zip Code

71909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2014

Transaction ID : SA11AI.275921

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. PHILIP DAVIS**

Mailing Address 713 TRILLIUM CIR

City

MARYVILLE

State

TN

Zip Code

37804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.272931

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. KENT DAVIS**

Mailing Address 1340 DEL ALTAIR AVE

City

REEDLEY

State

CA

Zip Code

93654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.273059

Amount of Each Receipt this Period

240.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

840.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. KENT DAVIS**

Mailing Address 1340 DEL ALTAIR AVE

City  
REEDLEY

State Zip Code  
CA 93654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.273060

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. PHILIP DAVIS**

Mailing Address 713 TRILLIUM CIR

City  
MARYVILLE

State Zip Code  
TN 37804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.272932

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. RICHARD DEMBSKI**

Mailing Address 3442 PARK RIDGE DR

City  
GROVE CITY

State Zip Code  
OH 43123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FAYETTE CO MMORIAL HOSPITAL

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.272542

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

290.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. TIMOTHY DEVANNEY**

Mailing Address 70 PORTER ST

City

MANCHESTER

State

CT

Zip Code

06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HIGHLAND PARK MARKETS

Occupation

RETAIL GROCER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

Transaction ID : SA11AI.273709

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. ROBERT DIAMOND**

Mailing Address 100 DONIZETTI PL APT 18C

City

BRONX

State

NY

Zip Code

10475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NY STATE

Occupation

AUDITOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	4

Transaction ID : SA11AI.275174

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. JOHN DIXON**

Mailing Address 618 FALCONER RD

City

ESCONDIDO

State

CA

Zip Code

92027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	1	4

Transaction ID : SA11AI.273181

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. RUSSELL DOUGLAS**

Mailing Address 400 NE 47TH ST

City

BOCA RATON

State

FL

Zip Code

33431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274215

Amount of Each Receipt this Period

280.00

Full Name (Last, First, Middle Initial)

## **B. ROBERT DOVAL**

Mailing Address 2457 COLLINS AVE APT 1805

City

MIAMI BEACH

State

FL

Zip Code

33140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 19 / 2014

Transaction ID : SA11AI.280361

Amount of Each Receipt this Period

15.00

EM/MCDANIEL/TRANS04242014

Full Name (Last, First, Middle Initial)

## **C. JAMES DOWNEY**

Mailing Address 26000 NEW BRIDGE DR

City

LOS ALTOS HILLS

State

CA

Zip Code

94022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AWAS SONOMA CORP.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.273992

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

595.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MS. WILMA M EDWARDS TTEE**

Mailing Address PO BOX 471

City

DEL MAR

State

CA

Zip Code

92014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 23 / 2014

Transaction ID : SA11AI.275294

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. LEE ELDREDGE**

Mailing Address 7335 N 210 RD

City

BEGGS

State

OK

Zip Code

74421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

04 / 07 / 2014

Transaction ID : SA11AI.272314

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. JUANITA EYHERABIDE**

Mailing Address 5284 KENT DR

City

BAKERSFIELD

State

CA

Zip Code

93306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

04 / 07 / 2014

Transaction ID : SA11AI.272977

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. JUANITA EYHERABIDE**

Mailing Address 5284 KENT DR

City

BAKERSFIELD

State

CA

Zip Code

93306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.272978

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JANE FALLON**

Mailing Address 4775 ORMONDE DR

City

CAZENOVIA

State

NY

Zip Code

13035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.272926

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. C FAUCHER**

Mailing Address 1908 W LAS PALMAS CIR

City

ORANGE

State

CA

Zip Code

92868

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2014

Transaction ID : SA11AI.274692

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. NEIL FERGUSON**

Mailing Address 10876 PASO ROBLES AVE

City State Zip Code  
 GRANADA HILLS CA 91344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 08 / 2014

Transaction ID : SA11AI.273170

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

## **B. JACK FINKELSTEIN**

Mailing Address 4635 SOUTHWEST FWY STE 635

City State Zip Code  
 HOUSTON TX 77027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 07 / 2014

Transaction ID : SA11AI.273816

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. KAY FINLAY**

Mailing Address 10 LA CERRA CIR

City State Zip Code  
 RANCHO MIRAGE CA 92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 08 / 2014

Transaction ID : SA11AI.272336

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

451.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MR EDDIE FISHER**

Mailing Address 764 GOLDEN POPPY CT

City  
SHAFTER

State Zip Code  
CA 93263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.273882

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. DAVID FITZWILLIAM**

Mailing Address 4100 CATHEDRAL AVE NW

City  
WASHINGTON

State Zip Code  
DC 20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SA11AI.280356

Amount of Each Receipt this Period

10.00

EM/MATHIS/TRANS04162014

Full Name (Last, First, Middle Initial)

## **C. R FORD**

Mailing Address 5124 WESTWIND WAY

City  
ANDERSON

State Zip Code  
SC 29626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.275218

Amount of Each Receipt this Period

270.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

430.00



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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. KIMBERLY FRANK**

Mailing Address 6109 E 105TH ST

City  
TULSA

State Zip Code  
OK 74137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SA11AI.273012

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL FUGLE**

Mailing Address 4815 SHELDON RD

City  
ROCHESTER

State Zip Code  
MI 48306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.272881

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR RICHARD J GALE**

Mailing Address 904 LOREAUVILLE RD

City  
NEW IBERIA

State Zip Code  
LA 70563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.273984

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

510.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR RICHARD J GALE**

Mailing Address 904 LOREAUVILLE RD

City  
NEW IBERIA

State Zip Code  
LA 70563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.273985

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MR KENNETH G GAMBLE**

Mailing Address 175 HUGUENOT ST PH 501

City  
NEW ROCHELLE

State Zip Code  
NY 10801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 15 / 2014

Transaction ID : SA11AI.272258

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MRS BETTY GARDNER**

Mailing Address 1572 GOODIN HOLLOW RD

City  
NOEL

State Zip Code  
MO 64854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.275192

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

825.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ROBERT GERTH**

Mailing Address 107 WOLVER HAMPTON CT

City State Zip Code  
 LEXINGTON SC 29072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 24 / 2014

**Transaction ID : SA11AI.275127**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. GABRIEL GERTNER**

Mailing Address 22748 HIGHWAY 138

City State Zip Code  
 STERLING CO 80751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : SA11AI.273276**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. GABRIEL GERTNER**

Mailing Address 22748 HIGHWAY 138

City State Zip Code  
 STERLING CO 80751

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11AI.273277**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. KAREN GIBBON**

Mailing Address 912 RAVENS RIDGE RD

City  
SEQUIM

State Zip Code  
WA 98382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2014

Transaction ID : SA11AI.273360

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. ALOYSIUS GOBLRISCH**

Mailing Address 9738 221ST AVE NW

City  
ELK RIVER

State Zip Code  
MN 55330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SA11AI.275424

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

## **C. MS JOSEPHINE P GONZALEZ**

Mailing Address 18210 APACHE SPRINGS DR

City  
SAN ANTONIO

State Zip Code  
TX 78259

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274571

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR JAMES C GORMAN**

Mailing Address PO BOX 2599

City

MANSFIELD

State

OH

Zip Code

44906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : SA11AI.274062**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. THOMAS GRAHAM**

Mailing Address 752 WOLTZ ATKINS RD

City

MOUNT AIRY

State

NC

Zip Code

27030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 24 / 2014

**Transaction ID : SA11AI.275752**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. GARY GROMER**

Mailing Address 1113 IVAN AVE

City

BAKERSFIELD

State

CA

Zip Code

93304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

**Transaction ID : SA11AI.273430**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DONALD GROVER**

Mailing Address 312 OLIVER ST APT 2

City

CORYDON

State

IN

Zip Code

47112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.272557

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MARY HACKMAN**

Mailing Address 16 SARAZEN CT

City

FLORHAM PARK

State

NJ

Zip Code

07932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 17 / 2014

Transaction ID : SA11AI.274754

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**C. PAUL HAMILTON**

Mailing Address 413 W CREEK ST

City

FREDERICKSBURG

State

TX

Zip Code

78624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SA11AI.273487

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

775.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. PAUL HAMILTON**

Mailing Address 413 W CREEK ST

City State Zip Code  
FREDERICKSBURG TX 78624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.273488

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. JAMES HAND**

Mailing Address 368 LOWER LAVISTA CT NW

City State Zip Code  
SALEM OR 97304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.272919

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. MARY HANNA**

Mailing Address 2305 BENNETT RD

City State Zip Code  
LAFAYETTE IN 47909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.273828

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. KARIN HARDY**

Mailing Address 1590 KELLOGG BAY RD

City

VERGENNES

State

VT

Zip Code

05491

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2014

**Transaction ID : SA11AI.273273**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. MARTIN HARRIS**

Mailing Address 41 GRANBURG CIR

City

SAN ANTONIO

State

TX

Zip Code

78218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2014

**Transaction ID : SA11AI.274606**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. RAY HAWKINS**

Mailing Address 1423 CLAYTON ST

City

PERRYVILLE

State

MD

Zip Code

21903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SA11AI.275250**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. JUSTIN HAWTHORNE**

Mailing Address 5422 CARMEL CT

City State Zip Code  
 TYLER TX 75703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 02 / 2014

Transaction ID : SA11AI.275765

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. MS. SUZANNE C. HEIST**

Mailing Address 3440 PUSSYWILLOW ST. # A

City State Zip Code  
 ANCHORAGE AK 99504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 06 / 2014

Transaction ID : SA11AI.280331

Amount of Each Receipt this Period

50.00

EM/MCDANIEL/TRANS04102014

Full Name (Last, First, Middle Initial)

**C. MR CHARLES HENDERSON**

Mailing Address 9 SLEEPY HOLLOW LN

City State Zip Code  
 NEWTOWN SQUARE PA 19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 07 / 2014

Transaction ID : SA11AI.273526

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

525.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ROSELEE HIGHT**

Mailing Address 8291 BRECKENRIDGE WAY

City State Zip Code  
 COLUMBUS OH 43235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 28 / 2014

Transaction ID : SA11AI.275827

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. BEVERLY HINDS**

Mailing Address 5100 JOHN D RYAN BLVD APT 150

City State Zip Code  
 SAN ANTONIO TX 78245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 11 / 2014

Transaction ID : SA11AI.274386

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. MR EARL HOLT III**

Mailing Address 1703 CLARENDON ST

City State Zip Code  
 LONGVIEW TX 75601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 08 / 2014

Transaction ID : SA11AI.275529

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. DAVID HUNTER**

Mailing Address 417 ROSEHILL DR

City State Zip Code  
 GOODLETTSVILLE TN 37072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 08 / 2014

**Transaction ID : SA11AI.272245**

Amount of Each Receipt this Period

320.00

Full Name (Last, First, Middle Initial)

## **B. ETHEL HUSER**

Mailing Address 1704 DECATUR RD

City State Zip Code  
 FREDONIA KS 66736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 09 / 2014

**Transaction ID : SA11AI.274688**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. NORMAN JACOBSON**

Mailing Address 900 UNIVERSITY ST APT 1002

City State Zip Code  
 SEATTLE WA 98101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : SA11AI.273299**

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

690.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. JUDY JARRETT**

Mailing Address 1209 GRINER ST

City

DEL RIO

State

TX

Zip Code

78840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SA11AI.272141

Amount of Each Receipt this Period

510.00

Full Name (Last, First, Middle Initial)

**B. FERENC KACSINTA**

Mailing Address 7323 CARTWRIGHT AVE

City

SUN VALLEY

State

CA

Zip Code

91352

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2014

Transaction ID : SA11AI.274096

Amount of Each Receipt this Period

720.00

Full Name (Last, First, Middle Initial)

**C. RICHARD KASPERSON**

Mailing Address 172 CHESHIRE WAY

City

NAPLES

State

FL

Zip Code

34110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SA11AI.274973

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1530.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. CARY KATZ**

Mailing Address 9021 GROVE CREST LN

City

LAS VEGAS

State

NV

Zip Code

89134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLLEGE LOAN CORPORATION

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10200.00

Date of Receipt

04 / 15 / 2014

Transaction ID : SA11AI.280338

Amount of Each Receipt this Period

5200.00

EM/BIRMAN/TRANS04242014

Full Name (Last, First, Middle Initial)

**B. CARY KATZ**

Mailing Address 9021 GROVE CREST LN

City

LAS VEGAS

State

NV

Zip Code

89134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLLEGE LOAN CORPORATION

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15400.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.280344

Amount of Each Receipt this Period

5200.00

EM/HALVORSON/TRANS04242014

Full Name (Last, First, Middle Initial)

**C. CARY KATZ**

Mailing Address 9021 GROVE CREST LN

City

LAS VEGAS

State

NV

Zip Code

89134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLLEGE LOAN CORPORATION

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20600.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.280360

Amount of Each Receipt this Period

5200.00

EM/MATHIS/TRANS04242014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. CARY KATZ**

Mailing Address 9021 GROVE CREST LN

City  
LAS VEGAS

State Zip Code  
NV 89134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COLLEGE LOAN CORPORATION

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 16 / 2014

Transaction ID : SA11AI.280363

Amount of Each Receipt this Period

5200.00

EM/MOONEY/TRANS04242014

Full Name (Last, First, Middle Initial)

## **B. NANCY KAYS**

Mailing Address 2231 N INDIAN HILL BLVD

City  
CLAREMONT

State Zip Code  
CA 91711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SA11AI.276160

Amount of Each Receipt this Period

135.00

Full Name (Last, First, Middle Initial)

## **C. TERRENCE KENNEY**

Mailing Address 13002 TIMBER TRL

City  
PALOS HEIGHTS

State Zip Code  
IL 60463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.272909

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5735.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MRS E MARDELL KINCADE-ENDRESEN**

Mailing Address 57 TENNIS CLUB DR

City State Zip Code  
RANCHO MIRAGE CA 92270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2014

Transaction ID : SA11AI.275364

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

## **B. CARLOS KIRKPATRICK**

Mailing Address 417 DALECREST DR

City State Zip Code  
WINDCREST TX 78239

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SA11AI.274037

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

## **C. JOHN KLEYLEIN**

Mailing Address 1909 TROUT FARM RD

City State Zip Code  
JARRETTSVILLE MD 21084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.274879

Amount of Each Receipt this Period

160.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. THOMAS KNEESHAW**

Mailing Address 900 COASTLINE DR

City

SEAL BEACH

State

CA

Zip Code

90740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2014

Transaction ID : SA11AI.274199

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. JOYCE KNOPP**

Mailing Address 38 ROAD 3CXS

City

CODY

State

WY

Zip Code

82414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2014

Transaction ID : SA11AI.275027

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. LELAND KOLLMORGEN**

Mailing Address 105 SADDLEBACK KNL

City

NELLYSFORD

State

VA

Zip Code

22958

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2014

Transaction ID : SA11AI.272409

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional)..... ►

740.00

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. CURTIS KREHBIEL**

Mailing Address 2602 W DENGAR AVE

City  
MIDLAND

State  
TX

Zip Code  
79705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

**Transaction ID : SA11AI.273455**

Amount of Each Receipt this Period

1440.00

Full Name (Last, First, Middle Initial)

## **B. CARL KROENING**

Mailing Address 999 41ST AVE NE APT 302

City  
MINNEAPOLIS

State  
MN

Zip Code  
55421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA11AI.273871**

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

## **C. DANIEL KUBIN**

Mailing Address 1701 BLOUNT ST

City  
HOUSTON

State  
TX

Zip Code  
77008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 01 / 2014

**Transaction ID : SA11AI.272463**

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. JANET LANASKY**

Mailing Address 1701 PINEHURST DR

City  
FINDLAY

State Zip Code  
OH 45840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.274123

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

## **B. KENNETH LANG**

Mailing Address 163 CHALLENGER

City  
KYLE

State Zip Code  
TX 78640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2014

Transaction ID : SA11AI.273414

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

## **C. MARILYN LEEDOM**

Mailing Address 1196 BLAKES WAY

City  
MENASHA

State Zip Code  
WI 54952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.275102

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

615.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MERRIE LEITE**

Mailing Address 2171 STAGE STOP DR

City  
HENDERSON

State Zip Code  
NV 89052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SA11AI.272856

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. MS. KAREN LIEN**

Mailing Address 1435 ELEPHANT RD

City  
PERKASIE

State Zip Code  
PA 18944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SA11AI.276008

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. MARJORIE LINDSEY**

Mailing Address 10202 DUTCH IRIS DR

City  
BAKERSFIELD

State Zip Code  
CA 93311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.276343

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. CHEONG LUM**

Mailing Address 5617 HALEPA PL

City

HONOLULU

State

HI

Zip Code

96821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2014

Transaction ID : SA11AI.272883

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. MRS LAURIE J MACKEY**

Mailing Address 4396 WINDLAKE DR

City

NICEVILLE

State

FL

Zip Code

32578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.276228

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. RAY MAGNUSSON**

Mailing Address 3070 WHITE RD NE

City

CONYERS

State

GA

Zip Code

30012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.274371

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. ROBERT MALONE**

Mailing Address 18721 E BUCKSKIN DR

City

RIO VERDE

State

AZ

Zip Code

85263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 23 / 2014

Transaction ID : SA11AI.273969

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

**B. KEN MANN**

Mailing Address 3747 BERRY DRIVE

City

STUDIO CITY

State

CA

Zip Code

91604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FIRST MERCURY

Occupation

INSURANCE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.280333

Amount of Each Receipt this Period

25.00

EM/RATCLIFFE/TRANS04102014

Full Name (Last, First, Middle Initial)

**C. GORDON MARANDO**

Mailing Address PO BOX 1251

City

CABOT

State

AR

Zip Code

72023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.275920

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR JAY GLENN MARKS**

Mailing Address 3455 S CORONA ST APT 237

City  
ENGLEWOOD

State Zip Code  
CO 80113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.272364

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. NICHOLAS MARTIN**

Mailing Address 6100 SOUTHWEST BLVD STE 501 # 501

City  
BENBROOK

State Zip Code  
TX 76109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.272760

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. KELLY MARZANO**

Mailing Address PO BOX 306

City  
JUNE LAKE

State Zip Code  
CA 93529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SILVER LAKE RESORT

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 10 / 2014

Transaction ID : SA11AI.280336

Amount of Each Receipt this Period

10.00

EM/BIRMAN/TRANS04162014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. KELLY MARZANO**

Mailing Address PO BOX 306

City  
JUNE LAKE

State Zip Code  
CA 93529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SILVER LAKE RESORT

Occupation  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280341

Amount of Each Receipt this Period

10.00

ME/BRIDENSTINE/TRANS04162014

Full Name (Last, First, Middle Initial)

## **B. KELLY MARZANO**

Mailing Address PO BOX 306

City  
JUNE LAKE

State Zip Code  
CA 93529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SILVER LAKE RESORT

Occupation  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280342

Amount of Each Receipt this Period

10.00

EM/BROUN/TRANS04162014

Full Name (Last, First, Middle Initial)

## **C. KELLY MARZANO**

Mailing Address PO BOX 306

City  
JUNE LAKE

State Zip Code  
CA 93529

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SILVER LAKE RESORT

Occupation  
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280343

Amount of Each Receipt this Period

10.00

EM/HALVORSON/TRANS04162014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. KELLY MARZANO**

Mailing Address PO BOX 306

City

JUNE LAKE

State

CA

Zip Code

93529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SILVER LAKE RESORT

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280345

Amount of Each Receipt this Period

10.00

EM/JOHNSON/TRANS04162014

Full Name (Last, First, Middle Initial)

**B. KELLY MARZANO**

Mailing Address PO BOX 306

City

JUNE LAKE

State

CA

Zip Code

93529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SILVER LAKE RESORT

Occupation

OFFICE MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

60.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280347

Amount of Each Receipt this Period

10.00

EM/LOUDERMILK/TRANS04162014

Full Name (Last, First, Middle Initial)

**C. MR GUY HELEN MAYBE**

Mailing Address 2555 STAGECOACH TRL

City

GORDON

State

TX

Zip Code

76453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.275992

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1020.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. DAVID MCCOSKER**

Mailing Address 3155 SANTA MARIA DR

City  
CONCORD

State Zip Code  
CA 94518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDEPENDENT CONSTRUCTION CO.

Occupation  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA11AI.273586**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. HAROLD MCDONALD**

Mailing Address 1924 MARCONI CIR

City  
ANNAPOLIS

State Zip Code  
MD 21401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA11AI.272292**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. KAY MCDONALD**

Mailing Address 1898 HENDERSHOT RD

City  
PARMA

State Zip Code  
MI 49269

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

**Transaction ID : SA11AI.274715**

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MRS PATSY MARIE MCDONALD**

Mailing Address 613 BUTLER POOL RD

City

IDABEL

State

OK

Zip Code

74745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.275592

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. MIKE MCDONALD**

Mailing Address 5234 21ST ST

City

LUBBOCK

State

TX

Zip Code

79407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274053

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**C. PATRICK MCKENNA**

Mailing Address 13 HAZELWOOD DR

City

CASEYVILLE

State

IL

Zip Code

62232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2014

Transaction ID : SA11AI.273943

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

475.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. JOHN MCKINNIS**

Mailing Address 106 BENT OAK DRIVE

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280354

Amount of Each Receipt this Period

25.00

EM/MATHIS/TRANS04162014

Full Name (Last, First, Middle Initial)

## **B. JOHN MCKINNIS**

Mailing Address 106 BENT OAK DRIVE

City

JOHNSON CITY

State

TN

Zip Code

37604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

04 / 25 / 2014

Transaction ID : SA11AI.280366

Amount of Each Receipt this Period

25.00

EM/SMITH/TRANS04302014

Full Name (Last, First, Middle Initial)

## **C. MR MIKE MEISSNER**

Mailing Address 2 WEEPING SPRUCE PL

City

CONROE

State

TX

Zip Code

77384

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11AI.274486

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN MILLETT**

Mailing Address 10304 RIDGEWOOD DR

City  
EL PASO

State Zip Code  
TX 79925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SA11AI.272832

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MR RONALD E MILNE**

Mailing Address 5029 BAY VIEW DR

City  
FORT WORTH

State Zip Code  
TX 76244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SA11AI.275023

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**C. MR GREGORY MOJZAK**

Mailing Address 2 SANCTUARY WAY

City  
FREELAND

State Zip Code  
MI 48623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOW CORNING

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.274202

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

650.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MRS. JUDITH D MONTZ**

Mailing Address 120 N GRIFFING BLVD.

City

ASHEVILLE

State

NC

Zip Code

28804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.280337

Amount of Each Receipt this Period

25.00

EM/BIRMAN/TRANS04162014

Full Name (Last, First, Middle Initial)

**B. MR SEBASTIAN A MORA**

Mailing Address 51 CHAMPIONS LN

City

SAN ANTONIO

State

TX

Zip Code

78257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOZLORSKY DELAY & WINTER

Occupation

OPHTHALMOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.276263

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. E MOSS**

Mailing Address 5625 COUNTY ROAD 441

City

HANNIBAL

State

MO

Zip Code

63401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

04 / 21 / 2014

Transaction ID : SA11AI.272202

Amount of Each Receipt this Period

1440.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1565.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 160

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

**A. TERENCE MURPHREE**

Mailing Address 1330 ENCLAVE PKWY STE 400

City	State	Zip Code
HOUSTON	TX	77077

FEC ID number of contributing federal political committee.

C

Name of Employer

UNITED STEEL STRUCTURES

Occupation

CONSTRUCTION EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2014

Transaction ID : SA11AI.274529

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. VICTORIA A NAGLE**

Mailing Address PO BOX 421005

City	State	Zip Code
FLINTON	PA	16640

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2014

Transaction ID : SA11AI.280339

Amount of Each Receipt this Period

10.00

EM/BIRMAN/TRANS04242014

Full Name (Last, First, Middle Initial)

**C. JOSEPH NAULT**

Mailing Address 100 VISTA BELLA WAY

City	State	Zip Code
NEWNAN	GA	30265

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2014

Transaction ID : SA11AI.274121

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2510.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ZETTA NELSON**

Mailing Address PO BOX 35

City

ALVERDA

State

PA

Zip Code

15710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.274623

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. JANE NEWTON**

Mailing Address 31409 PETERSON RD

City

PHILOMATH

State

OR

Zip Code

97370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.276107

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. MARILYN NIELSON**

Mailing Address 7 SILVERLEAF DR

City

ROLLING HILLS ESTATE

State

CA

Zip Code

90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.272935

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ARCHIE NOGLE**

Mailing Address 4177 OAKWOOD RD

City State Zip Code  
 LOMPOC CA 93436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11AI.272285

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. MICHAEL NOTZON**

Mailing Address 303 GREEN GABLE DRIVE

City State Zip Code  
 VICTORIA TX 77904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11AI.280358

Amount of Each Receipt this Period

50.00

EM/MATHIS/TRANS04162014

Full Name (Last, First, Middle Initial)

## **C. LARRY NUPEN**

Mailing Address 613 N 2ND ST

City State Zip Code  
 ABERDEEN SD 57401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

04 / 02 / 2014

Transaction ID : SA11AI.274619

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

270.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. RICHARD OLANDER**

Mailing Address 1742 N FITZGERALD LN

City  
HANFORD

State Zip Code  
CA 93230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.275602

Amount of Each Receipt this Period

104.00

Full Name (Last, First, Middle Initial)

**B. ANDREW OLEKSY**

Mailing Address 1450 MARLTON PIKE E

City  
CHERRY HILL

State Zip Code  
NJ 08034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2014

Transaction ID : SA11AI.276029

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. DR. JONATHAN ORR**

Mailing Address 37 RIDGE RD.

City  
DANBURY

State Zip Code  
CT 06810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ANESTHESIOLOGIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2014

Transaction ID : SA11AI.280355

Amount of Each Receipt this Period

100.00

EM/MATHIS/TRANS04162014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

254.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. JOYCE ORRIS**

Mailing Address 5285 BULL CREEK RD

City  
TARENTUM

State Zip Code  
PA 15084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FAWN DEVELOPERS

Occupation  
BOOKKEEPER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

**Transaction ID : SA11AI.273975**

Amount of Each Receipt this Period

112.00

Full Name (Last, First, Middle Initial)

## **B. DAVID OSBORN**

Mailing Address 2077 SENTINEL RD

City  
DORSET

State Zip Code  
OH 44032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 01 / 2014

**Transaction ID : SA11AI.274713**

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

## **C. DALE OYHUS**

Mailing Address 13973 FRANKS CREEK RD

City  
MEDORA

State Zip Code  
ND 58645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

**Transaction ID : SA11AI.274068**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

812.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. DARRELL PAUSKY**

Mailing Address 164 STONE CREEK RANCH RD

City State Zip Code  
MC GREGOR TX 76657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.274274

Amount of Each Receipt this Period

180.00

Full Name (Last, First, Middle Initial)

## **B. NELSON PAYNE**

Mailing Address 37119 SABER CT

City State Zip Code  
GREENBACKVILLE VA 23356

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.272945

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

## **C. RICHARD PAYNE**

Mailing Address PO BOX 509

City State Zip Code  
ANSON TX 79501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.274918

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

470.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. NELSON PAYNE**

Mailing Address 37119 SABER CT

City State Zip Code  
 GREENBACKVILLE VA 23356

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 28 / 2014

Transaction ID : SA11AI.272946

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. JOSEPH PELLECCIA**

Mailing Address 5 COATES RD

City State Zip Code  
 ALLENTOWN NJ 08501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

Transaction ID : SA11AI.273284

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. PETE PELLINI**

Mailing Address 10025 CHERRY RIDGE RD

City State Zip Code  
 SEBASTOPOL CA 95472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 08 / 2014

Transaction ID : SA11AI.275605

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

925.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. ROBERT PERLICK**

Mailing Address 1405 WOODLAWN CIR

City	State	Zip Code
ELM GROVE	WI	53122

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2014

Transaction ID : SA11AI.272971

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. JOSEPH PERRICONE**

Mailing Address 18 OLD COURSE DR

City	State	Zip Code
NEWPORT BEACH	CA	92660

FEC ID number of contributing federal political committee.

C

Name of Employer

PERRICONE INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2014

Transaction ID : SA11AI.273223

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. WILLIAM PEYTON**

Mailing Address 9228 E STATE ROAD 42

City	State	Zip Code
RAGO	KS	67142

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2014

Transaction ID : SA11AI.274105

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ▶

850.00

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. KAY POITRAS**

Mailing Address 949 HAMILTON CIR

City

HAINES CITY

State

FL

Zip Code

33844

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

**Transaction ID : SA11AI.274408**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. PALMER QUARLES**

Mailing Address 78 OAK CIR

City

NEWVILLE

State

PA

Zip Code

17241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SA11AI.274834**

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

## **C. PALMER QUARLES**

Mailing Address 78 OAK CIR

City

NEWVILLE

State

PA

Zip Code

17241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SA11AI.274835**

Amount of Each Receipt this Period

180.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

920.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ARTHUR RANEY**

Mailing Address 1020 WESTBROOK DR

City State Zip Code  
MOORESVILLE IN 46158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

**Transaction ID : SA11AI.274746**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. QUENTIN REMEIN**

Mailing Address 18 WYNKOOP CT

City State Zip Code  
BETHESDA MD 20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA11AI.272274**

Amount of Each Receipt this Period

560.00

Full Name (Last, First, Middle Initial)

## **C. MR JAMES A REMINGTON**

Mailing Address 2300 CEDARFIELD PKWY APT 263

City State Zip Code  
RICHMOND VA 23233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2014

**Transaction ID : SA11AI.275728**

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3585.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MRS. FRAN RICHMOND**

Mailing Address 6868 N. TONTY AV.

City  
CHICAGOState Zip Code  
IL 60646FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 05 2014

Transaction ID : SA11AI.280330

Amount of Each Receipt this Period

25.00

EM/MCDANIEL/TRANS04102014

Full Name (Last, First, Middle Initial)

**B. KATHRYN RIEMCKE**

Mailing Address 4555 NE 66TH AVE APT 323

City  
VANCOUVERState Zip Code  
WA 98661FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 01 2014

Transaction ID : SA11AI.274450

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. PHILIP RITCH**

Mailing Address 146 KALUAMOO ST

City  
KAILUAState Zip Code  
HI 96734FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 29 2014

Transaction ID : SA11AI.272808

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. JOHN ROBERTS**

Mailing Address 6708 TREVI CT

City

OKLAHOMA CITY

State

OK

Zip Code

73116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 02 / 2014

Transaction ID : SA11AI.272206

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. JAMES M ROBINSON**

Mailing Address 7447 FIELDCREST

City

BRIGHTON

State

MI

Zip Code

48116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11AI.280357

Amount of Each Receipt this Period

25.00

EM/MATHIS/TRANS04162014

Full Name (Last, First, Middle Initial)

## **C. RUTH ROCKWELL**

Mailing Address 6205 MINERAL POINT RD APT 211

City

MADISON

State

WI

Zip Code

53705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.275690

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

425.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. KENNETH ROLFE**

Mailing Address 301 SE FOUNDATION DR

City State Zip Code  
DALLAS OR 97338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.275253

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

## **B. ESTHERMAE ROOKE**

Mailing Address 75 LAGUNA VISTA PT

City State Zip Code  
KERRVILLE TX 78028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.274582

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **C. JOHN RUTLEDGE**

Mailing Address 8849 HAWTHORNE PT

City State Zip Code  
WESTERVILLE OH 43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 24 / 2014

Transaction ID : SA11AI.273508

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

590.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. ANTHONY RYAN**

Mailing Address 393 DORCHESTER RD

City  
LYME

State  
NH

Zip Code  
03768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 11 / 2014

Transaction ID : SA11AI.272892

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. CHARLES SAMMLER**

Mailing Address 505 COONPATH RD NE

City

LANCASTER

State

OH

Zip Code

43130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.273095

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

## **C. CHARLES SAMMLER**

Mailing Address 505 COONPATH RD NE

City

LANCASTER

State

OH

Zip Code

43130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.273096

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

940.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR JOSEPH C SCHATTEMAN**

Mailing Address 2 LATTICE PL

City

GREENVILLE

State

SC

Zip Code

29615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 24 / 2014

Transaction ID : SA11AI.274729

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. KARL SCHEIDHAUER**

Mailing Address 1196 FOOTHILL ST

City

REDWOOD CITY

State

CA

Zip Code

94061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.275289

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. ROBERT SCHLORTT**

Mailing Address 188 MARQUITOS DR

City

KYLE

State

TX

Zip Code

78640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.276247

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

520.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. HENRY SCHMIDT**

Mailing Address 32023 MAYER RD

City  
WALLER

State  
TX

Zip Code  
77484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.272371

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

**B. STANLEY SCHMIDT**

Mailing Address PO BOX 137

City  
DALLAS

State  
OR

Zip Code  
97338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.274657

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. ELMER SCHOENHALS**

Mailing Address 13850 COUNTY ROAD L

City  
PERRYTON

State  
TX

Zip Code  
79070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.275541

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. CHARLES SCHUHMACHER**

Mailing Address PO BOX 57868

City

WEBSTER

State

TX

Zip Code

77598

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.273983

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. MR JAMES K SHAHAN**

Mailing Address PO BOX 64

City

SAN SABA

State

TX

Zip Code

76877

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

04 / 09 / 2014

Transaction ID : SA11AI.276258

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. CATHERINE SHORT**

Mailing Address 2967 S ATLANTIC AVE APT 1107

City

DAYTONA BEACH

State

FL

Zip Code

32118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 28 / 2014

Transaction ID : SA11AI.273467

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

820.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MR GEORGE SINGLETON**

Mailing Address 200 N ELM ST

City

WAXAHACHIE

State

TX

Zip Code

75165

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SA11AI.273820

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. RALPH SKILLEN**

Mailing Address 12308 CHILDRESS ST

City

BAKERSFIELD

State

CA

Zip Code

93312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CHIROPRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.276078

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. RUBY SMALLEY**

Mailing Address 978 NAPLES ST

City

MENDOTA

State

CA

Zip Code

93640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.273302

Amount of Each Receipt this Period

80.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

580.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM SMITH**

Mailing Address 4833 W 96TH ST

City

MINNEAPOLIS

State

MN

Zip Code

55437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 07 / 2014

Transaction ID : SA11AI.273527

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. BAKER SMITH**

Mailing Address 3360 E TERRELL BRANCH CT SE

City

MARIETTA

State

GA

Zip Code

30067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BDO CONSULTING CORP. ADVISORS

Occupation

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 14 / 2014

Transaction ID : SA11AI.272871

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. HELEN SNYDER**

Mailing Address 225 VALLEJO CT

City

MILLBRAE

State

CA

Zip Code

94030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.273589

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00



**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MICHAEL ST JOHN**

Mailing Address 82 OLD CHESTER RD

City

ESSEX FELLS

State

NJ

Zip Code

07021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 04 / 09 / 2014

Transaction ID : SA11AI.273422

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. AMANDA STARCK**

Mailing Address 2806 METZ DR

City

MIDLAND

State

TX

Zip Code

79705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EGL RESOURCES INC.

Occupation

ENGINEER

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 04 / 04 / 2014

Transaction ID : SA11AI.273789

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C. JAMES O STEWART JR.**Mailing Address 124 W CASTELLANO  
STE. 213

City

EL PASO

State

TX

Zip Code

79912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 04 / 25 / 2014

Transaction ID : SA11AI.272091

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. EUGENE STOCK**

Mailing Address 41795 EL CAMINO DR

City  
HEMET

State Zip Code  
CA 92544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 01 / 2014

Transaction ID : SA11AI.272652

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. MR MILTON S STRONG**

Mailing Address 4319 MARGATE DR

City  
DALLAS

State Zip Code  
TX 75220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

Transaction ID : SA11AI.273822

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. SHARON STROTHER**

Mailing Address 4201 STANHOPE ST

City  
DALLAS

State Zip Code  
TX 75205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2014

Transaction ID : SA11AI.272553

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MS. MARIE W STUART III**

Mailing Address 430 VILLAGE PL APT 314

City  
LONGWOOD

State Zip Code  
FL 32779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA11AI.274437

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**B. MARY STULTZ**

Mailing Address 262 DEERFIELD CIR

City  
KINGWOOD

State Zip Code  
WV 26537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 24 / 2014

Transaction ID : SA11AI.272510

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. JOSEPH STURKEY**

Mailing Address PO BOX 28749

City  
SAN JOSE

State Zip Code  
CA 95159

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2014

Transaction ID : SA11AI.280334

Amount of Each Receipt this Period

250.00

ME/BIRMAN/TRANS04102014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DONALD SURGEON**

Mailing Address PO BOX 363

City

JERSEYVILLE

State

IL

Zip Code

62052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SA11AI.275810

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. DONALD SURGEON**

Mailing Address PO BOX 363

City

JERSEYVILLE

State

IL

Zip Code

62052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SA11AI.275811

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. CHARLES SWIFT**

Mailing Address 316 GREENLEAF DR

City

KERRVILLE

State

TX

Zip Code

78028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2014

Transaction ID : SA11AI.274993

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

475.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MARILYN TAYLOR**

Mailing Address 804 TOBACCOPORT RD

City State Zip Code  
 BUMPUS MILLS TN 37028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 02 / 2014

Transaction ID : SA11AI.272207

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. ROBERT TECHO**

Mailing Address 311 TAHOE DR

City State Zip Code  
 HARTWELL GA 30643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 08 / 2014

Transaction ID : SA11AI.273194

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **C. GENE TERHUNE**

Mailing Address 1213 MAPLE AVE

City State Zip Code  
 ODESSA TX 79761

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 07 / 2014

Transaction ID : SA11AI.275934

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. SARA THOMAS**

Mailing Address 177 N HIGHLAND ST APT 4207

City State Zip Code  
 MEMPHIS TN 38111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 07 / 2014

**Transaction ID : SA11AI.274578**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. D TINDAL**

Mailing Address 1322 LES TINDAL RD

City State Zip Code  
 PINEWOOD SC 29125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : SA11AI.273274**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. SAMUEL TODD**

Mailing Address 5266 CREEK WALK CIR

City State Zip Code  
 NORCROSS GA 30092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 02 / 2014

**Transaction ID : SA11AI.275775**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. MARY TOPPER**

Mailing Address 1003 HAMPTON WAY

City State Zip Code  
TRENT WOODS NC 28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.15

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 09 / 2014

Transaction ID : SA11AI.275464

Amount of Each Receipt this Period

300.15

Full Name (Last, First, Middle Initial)

## **B. MELVIN TRAVIS**

Mailing Address 200 COUNTY ROAD 497

City State Zip Code  
DE LEON TX 76444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SA11AI.275834

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

## **C. MARY TURNER**

Mailing Address 1074 SHANNON HILL RD

City State Zip Code  
COLUMBIA VA 23038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SA11AI.273743

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

760.15

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. ROY VANCE**

Mailing Address 105 KENDALL LN

City State Zip Code  
 BOERNE TX 78015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 28 / 2014

Transaction ID : SA11AI.273605

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. MATHEW VANDERKOP**

Mailing Address 1704 PARKSIDE DR

City State Zip Code  
 PASADENA TX 77502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 03 / 2014

Transaction ID : SA11AI.275703

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**C. MATHEW VANDERKOP**

Mailing Address 1704 PARKSIDE DR

City State Zip Code  
 PASADENA TX 77502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 14 / 2014

Transaction ID : SA11AI.275704

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

740.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. LT COL MARIE L WAGNER RET**

Mailing Address 233 CARMEL DR APT 313

City State Zip Code  
 FORT WALTON BEACH FL 32547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 11 / 2014

**Transaction ID : SA11AI.274216**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. DOUGLAS WALKER**

Mailing Address 503 NW 102ND TER

City State Zip Code  
 GAINESVILLE FL 32607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 04 / 2014

**Transaction ID : SA11AI.275354**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. MRS MARTHA WALL**

Mailing Address 905 SWEETBRIAR AVE

City State Zip Code  
 WHITELAND IN 46184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 / 21 / 2014

**Transaction ID : SA11AI.272249**

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

320.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM WALLACE**

Mailing Address 195 SUNRISE HILL CIR

City  
ORANGE

State Zip Code  
CT 06477

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 08 / 2014

**Transaction ID : SA11AI.275336**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. JOAN WALLACE**

Mailing Address 2232 N BEGLIS PKWY

City  
SULPHUR

State Zip Code  
LA 70663

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SA11AI.275968**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. DAVID WARD**

Mailing Address PO BOX 329

City  
WIMAUMA

State Zip Code  
FL 33598

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA11AI.272350**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. TERESA WASSON**

Mailing Address 1437 S 825 W

City

PORTLAND

State

IN

Zip Code

47371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

04 / 21 / 2014

Transaction ID : SA11AI.280335

Amount of Each Receipt this Period

10.00

EM/BEVIN/TRANS04302014

Full Name (Last, First, Middle Initial)

**B. TERESA WASSON**

Mailing Address 1437 S 825 W

City

PORTLAND

State

IN

Zip Code

47371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

04 / 21 / 2014

Transaction ID : SA11AI.280346

Amount of Each Receipt this Period

10.00

EM/JOHNSON/TRANS04302014

Full Name (Last, First, Middle Initial)

**C. TERESA WASSON**

Mailing Address 1437 S 825 W

City

PORTLAND

State

IN

Zip Code

47371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

04 / 21 / 2014

Transaction ID : SA11AI.280362

Amount of Each Receipt this Period

10.00

EM/MCDANIEL/TRANS04302014

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. TERESA WASSON**

Mailing Address 1437 S 825 W

City  
PORTLAND

State Zip Code  
IN 47371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2014

Transaction ID : SA11AI.280364

Amount of Each Receipt this Period

10.00

EM/MOONEY/TRANS04302014

Full Name (Last, First, Middle Initial)

**B. TERESA WASSON**

Mailing Address 1437 S 825 W

City  
PORTLAND

State Zip Code  
IN 47371

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2014

Transaction ID : SA11AI.280365

Amount of Each Receipt this Period

10.00

EM/RATCLIFFE/TRANS04302014

Full Name (Last, First, Middle Initial)

**C. WILLIAM WEISE**

Mailing Address 7444 SPRING VILLAGE DR APT 306

City  
SPRINGFIELD

State Zip Code  
VA 22150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.272278

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

320.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. RICHARD WHITLEY**

Mailing Address 8660 DELMONICO AVE

City State Zip Code  
 CANOGA PARK CA 91304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 04 / 2014

Transaction ID : SA11AI.273239

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. DOROTHY WHITWORTH**

Mailing Address 390 GREENCREST DR

City State Zip Code  
 ATHENS GA 30605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

04 / 15 / 2014

Transaction ID : SA11AI.273546

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. JAMES WILL**

Mailing Address 616 BROADWAY

City State Zip Code  
 TACOMA WA 98402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 04 / 2014

Transaction ID : SA11AI.272998

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. WALTER WILLIAMS**

Mailing Address 1100 SW SHORELINE DR APT 325

City State Zip Code  
 PALM CITY FL 34990

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.273188

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **B. JACKIE WILLIAMS**

Mailing Address 3253 FOX GRAPE ST

City State Zip Code  
 SPRINGFIELD MO 65804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

04 / 14 / 2014

Transaction ID : SA11AI.274576

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. JACKIE WILLIAMS**

Mailing Address 3253 FOX GRAPE ST

City State Zip Code  
 SPRINGFIELD MO 65804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

04 / 25 / 2014

Transaction ID : SA11AI.274577

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DANIEL WILSON**

Mailing Address PO BOX 2034

City  
LAUREL

State Zip Code  
MS 39442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 09 / 2014

Transaction ID : SA11AI.273939

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. JON WONG**

Mailing Address 3628 KINGS WAY APT 2

City  
SACRAMENTO

State Zip Code  
CA 95821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 16 / 2014

Transaction ID : SA11AI.280340

Amount of Each Receipt this Period

5.00

EM/BIRMAN/TRANS04242014

Full Name (Last, First, Middle Initial)

**C. ESTER WOOD**

Mailing Address 2485 TOWNLEY LN

City  
NORTH GARDEN

State Zip Code  
VA 22959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.02

Date of Receipt

M M / D D / Y Y Y Y  
04 / 10 / 2014

Transaction ID : SA11AI.274626

Amount of Each Receipt this Period

101.02

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

206.02

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. THOMAS WRIGHT**

Mailing Address 1275 POPLAR DR

City

EL CENTRO

State

CA

Zip Code

92243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2014

Transaction ID : SA11AI.275132

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

86591.17



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

## **A. COMPAK SERVICES INC.**

Mailing Address 365A NEW ALBANY ROAD

City State Zip Code  
MOORESTOWN NJ 08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2427.89

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA15.272132

Amount of Each Receipt this Period

2427.89

PAC POSTAGE REFUND

Full Name (Last, First, Middle Initial)

## **B. HSP DIRECT**

Mailing Address 13755 SUNRISE DR  
SUITE 450

City State Zip Code  
HERNDON VA 20171

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.23

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2014

Transaction ID : SA15.272133

Amount of Each Receipt this Period

484.36

PAC POSTAGE REFUND

Full Name (Last, First, Middle Initial)

## **C. PAYCHEX**

Mailing Address 911 PANORAMA TRAIL S.

City State Zip Code  
ROCHESTER NY 14625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.46

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2014

Transaction ID : SA15.280445

Amount of Each Receipt this Period

206.46

PAC REFUND

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3118.71

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	--	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. TOWNHALL.COM**

Mailing Address 402 BNA DR. STE. 400

City

NASHVILLE

State

TN

Zip Code

37217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2014

**Transaction ID : SA15.263815**

Amount of Each Receipt this Period

15000.00

PAC REFUND

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15000.00

18118.71



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. ANEDOT

City	State	Zip Code
BATON ROUGE	LA	70801

Transaction ID : SB21B.280441

00.

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

24.37

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**B. AT&T INC.**

04 / 01 / 2014

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Transaction ID : SB21B.280377

Purpose of Disbursement	PAC CELL PHONE
-------------------------	----------------

00

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

138 67

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**C. AT&T INC.**

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Transaction ID : SB21B.280447

Purpose of Disbursement	PAC CELL PHONE
-------------------------	----------------

00'

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

157.78

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

320.82

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

**A. AT&T INC.**

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement	PAC CELL PHONE
-------------------------	----------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.280420

Amount of Each Disbursement this Period

Response	Percentage of respondents
U.S. should take more action to reduce global warming	115.05

Full Name (Last, First, Middle Initial)

## B. ATMOS ENERGY

Mailing Address PO BOX 790311

City	State	Zip Code
ST. LOUIS	MO	63179

Purpose of Disbursement
PAC UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

04 / 01 / 2014

Transaction ID : SB21B.280451

Amount of Each Disbursement this Period

420.21

Full Name (Last, First, Middle Initial)

### C. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City	State	Zip Code
CHARLOTTE	NC	28202

Purpose of Disbursement
PAC BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Transaction ID : SB21B.280369

Amount of Each Disbursement this Period



10.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

545.26

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

### A. BANK OF AMERICA

Date of Disbursement

Transaction ID : SB21B.280372

001

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

## B. BANK OF AMERICA

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
CHARLOTTE	NC	28202

Transaction ID : SB21B.280448

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. BANK OF AMERICA

Date of Disbursement

City	State	Zip Code
CHARLOTTE	NC	28202

Transaction ID : SB21B.280390

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

61.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

Transaction ID : SB21B.280396

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 25 / 2014

Transaction ID : SB21B.280412

Amount of Each Disbursement this Period

3.00

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 30 / 2014

Transaction ID : SB21B.280449

Amount of Each Disbursement this Period

95.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

123.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. JEFF BLACKSTONE**

Mailing Address 117 EAST 18TH

City OWENSBORO      State KY      Zip Code 42303

Purpose of Disbursement  
PAC FIELD CONSULTING

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2014
**Transaction ID : SB21B.280415**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. BOWLING GREEN MUNICIPAL UTILITIES**

Mailing Address 801 CENTER ST.

City BOWLING GREEN      State KY      Zip Code 42101

Purpose of Disbursement  
PAC UTILITIES

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      04      2014
**Transaction ID : SB21B.280384**

Amount of Each Disbursement this Period

53.28

Full Name (Last, First, Middle Initial)

**C. BOWLING GREEN MUNICIPAL UTILITIES**

Mailing Address 801 CENTER ST.

City BOWLING GREEN      State KY      Zip Code 42101

Purpose of Disbursement  
PAC UTILITIES

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2014
**Transaction ID : SB21B.280422**

Amount of Each Disbursement this Period

56.99

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1610.27



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. LARRY BROWN**

Mailing Address 8202 ADELLA

City  
FLORENCEState  
KYZip Code  
41042Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04      02      2014
**Transaction ID : SB21B.280452**

Amount of Each Disbursement this Period

306.05

Full Name (Last, First, Middle Initial)

**B. AT&T INC.**

Mailing Address 208 S AKARD ST

City  
DALLASState  
TXZip Code  
75202Purpose of Disbursement  
PAC CELL PHONE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04      02      2014
**Transaction ID : SB21B.280453**

Amount of Each Disbursement this Period

306.05

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. LARRY BROWN**

Mailing Address 8202 ADELLA

City  
FLORENCEState  
KYZip Code  
41042Purpose of Disbursement  
PAC FIELD CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04      25      2014
**Transaction ID : SB21B.280416**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1806.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. LARRY BROWN**

Mailing Address 8202 ADELLA

City  
FLORENCEState  
KYZip Code  
41042Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2014
**Transaction ID : SB21B.280418**

Amount of Each Disbursement this Period

60.73

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 4840 SHAWLINE ST.

City  
SAN DIEGOState  
CAZip Code  
92111Purpose of Disbursement  
PAC OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      25      2014
**Transaction ID : SB21B.280419**

Amount of Each Disbursement this Period

60.73

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. CABLE ONE**

Mailing Address PO BOX 78407

City  
PHOENIXState  
AZZip Code  
85062Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      29      2014
**Transaction ID : SB21B.280426**

Amount of Each Disbursement this Period

51.97

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. CAROL CALAMAIO**

Mailing Address 162 RAYS BRANCH ROAD

City BOWLING GREEN      State KY      Zip Code 42101

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04      24      2014
**Transaction ID : SB21B.280455**

Amount of Each Disbursement this Period

42.40

Full Name (Last, First, Middle Initial)

**B. AT&T INC.**

Mailing Address 208 S AKARD ST

City DALLAS      State TX      Zip Code 75202

Purpose of Disbursement  
PAC CELL PHONE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04      24      2014
**Transaction ID : SB21B.280456**

Amount of Each Disbursement this Period

42.40

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. CAROL CALAMAIO**

Mailing Address 162 RAYS BRANCH ROAD

City BOWLING GREEN      State KY      Zip Code 42101

Purpose of Disbursement  
PAC FIELD CONSULTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04      25      2014
**Transaction ID : SB21B.280417**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1542.40

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. COLORTREE OF VIRGINIA

Mailing Address 2519 BRITTONS HILL RD

City	State	Zip Code
RICHMOND	VA	23230

Purpose of Disbursement	PAC PRINTING & MAILING
-------------------------	------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.272106

Amount of Each Disbursement this Period

Percentage

Vaccinated

1121.45

Full Name (Last, First, Middle Initial)

## B. COLORTREE OF VIRGINIA

Mailing Address 2519 BRITTONS HILL RD

City	State	Zip Code
RICHMOND	VA	23230

Purpose of Disbursement	PAC PRINTING & MAILING
-------------------------	------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.272115

Amount of Each Disbursement this Period

2052.62

Full Name (Last, First, Middle Initial)

**C. COMPAK SERVICES INC.**

Mailing Address 365A NEW ALBANY ROAD

City	State	Zip Code
MOORESTOWN	NJ	08057

Purpose of Disbursement	PAC POSTAGE & DELIVERY
-------------------------	------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.272107

Amount of Each Disbursement this Period

1444.34

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4618.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. COMPAK SERVICES INC.**

Mailing Address 365A NEW ALBANY ROAD

City  
MOORESTOWNState  
NJZip Code  
08057Purpose of Disbursement  
PAC POSTAGE & DELIVERY

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2014
**Transaction ID : SB21B.272116**

Amount of Each Disbursement this Period

1216.66

Full Name (Last, First, Middle Initial)

**B. RYAN DAVIDSON**

Mailing Address 121 E. 36TH ST.

City  
GARDEN CITYState  
IDZip Code  
83714Purpose of Disbursement  
PAC FIELD CONSULTING

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2014
**Transaction ID : SB21B.280413**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. DONOR BUREAU**

Mailing Address 1900 N CULPEPER ST

City  
ARLINGTONState  
VAZip Code  
22207Purpose of Disbursement  
PAC STATISTICAL MODELING

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2014
**Transaction ID : SB21B.272125**

Amount of Each Disbursement this Period

547.28

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3763.94

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DUKE ENERGY**

Mailing Address PO BOX 1326

City CHARLOTTE      State NC      Zip Code 28201

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2014
**Transaction ID : SB21B.280393**

Amount of Each Disbursement this Period

171.27

Full Name (Last, First, Middle Initial)

**B. DUKE ENERGY**

Mailing Address PO BOX 1326

City CHARLOTTE      State NC      Zip Code 28201

Purpose of Disbursement  
PAC UTILITIES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2014
**Transaction ID : SB21B.280394**

Amount of Each Disbursement this Period

87.97

Full Name (Last, First, Middle Initial)

**C. ELECTEK**

Mailing Address PO BOX 23715

City CHAGRIN FALLS      State OH      Zip Code 44023

Purpose of Disbursement  
PAC SOFTWARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2014
**Transaction ID : SB21B.280391**

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

859.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. FIRST VIRGINIA COMMUNITY BANK**

Mailing Address 11325 RANDOM HILLS RD STE 240

City FAIRFAX      State VA      Zip Code 22030

Purpose of Disbursement  
PAC BANK FEES

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      22      2014
**Transaction ID : SB21B.272121**

Amount of Each Disbursement this Period

531.44

Full Name (Last, First, Middle Initial)

**B. FLORENCE WATER AND SEWER**

Mailing Address PO BOX 1552

City FLORENCE      State KY      Zip Code 41042

Purpose of Disbursement  
PAC UTILITIES

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      01      2014
**Transaction ID : SB21B.280376**

Amount of Each Disbursement this Period

795.59

Full Name (Last, First, Middle Initial)

**C. FULFILLMENT HOUSE**

Mailing Address 13860 REDSKIN DR

City HERNDON      State VA      Zip Code 20171

Purpose of Disbursement  
PAC POSTAGE & DELIVERY

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      03      2014
**Transaction ID : SB21B.272108**

Amount of Each Disbursement this Period

10459.40

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11786.43

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. FULFILLMENT HOUSE

Date of Disbursement

Transaction ID : SB21B.272120

001

Category/  
Type

Amount of Each Disbursement this Period

5000.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

## B. GLOBAL PAYMENTS INC

Date of Disbursement

04 / 22 / 2014

City	State	Zip Code
OWINGS MILLS	MD	21117

Transaction ID : SB21B.272122

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1216.53

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. GOBER HILGERS PLLC

Date of Disbursement



Mailing Address 2101 CEDAR SPRINGS RD STE 1050  
SUITE 1050

City	State	Zip Code
DALLAS	TX	75201

Transaction ID : SB21B.280388

Purpose of Disbursement
PAC LEGAL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8216.53



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. GRAVIS MARKETING

Mailing Address 910 BELLE AVE.  
SUITE 1180

City	State	Zip Code
WINTER SPRINGS	FL	32708

Transaction ID : SB21B.280405

### Purpose of Disbursement

#### PAC POLLING

00:

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

## B. GRACE HOGAN

04 / 10 / 2014

Mailing Address 27806 LATHRUP BLVD

City	State	Zip Code
LATHRUP VILLAGE	MI	48076

Transaction ID : SB21B.280392

Purpose of Disbursement
PAC FIELD CONSULTING

00

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

### C. DANIEL HOROWITZ

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '04' with 4 segments lit. The second display shows '04' with 4 segments lit. The third display shows '2014' with 10 segments lit.

Mailing Address 2711 SUMMERSON RD.

City	State	Zip Code
BALTIMORE	MD	21209

Transaction ID : SB21B.280386

Purpose of Disbursement  
SEE BELOW

00'

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

3416.94

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

### A. AT&T INC.

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement	PAC CELL PHONE
-------------------------	----------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.280387

Amount of Each Disbursement this Period

96.94

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## B. DANIEL HOROWITZ

Mailing Address 2711 SUMMERSON RD.

City	State	Zip Code
BALTIMORE	MD	21209

Purpose of Disbursement
PAC SALARY

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.280433

Amount of Each Disbursement this Period

4017.37

Full Name (Last, First, Middle Initial)

### C. HSP DIRECT

Mailing Address 13755 SUNRISE DR  
SUITE 450

City	State	Zip Code
HERNDON	VA	20171

Purpose of Disbursement	PAC DIRECT MAIL CREATIVE FEES
-------------------------	-------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.272109

Amount of Each Disbursement this Period

8016.60

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

12033.97

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. HSP DIRECT**Mailing Address 13755 SUNRISE DR  
SUITE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement  
PAC POSTAGE

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 30 2014**Transaction ID : SB21B.272130**

Amount of Each Disbursement this Period

703.25

Full Name (Last, First, Middle Initial)

**B. IMAGE DIRECT**

Mailing Address 4600 WEDGEWOOD BLVD UNIT N

City FREDERICK State MD Zip Code 21703

Purpose of Disbursement  
PAC PRINTING & MAILING

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 03 2014**Transaction ID : SB21B.272110**

Amount of Each Disbursement this Period

4472.28

Full Name (Last, First, Middle Initial)

**C. IMAGE DIRECT**

Mailing Address 4600 WEDGEWOOD BLVD UNIT N

City FREDERICK State MD Zip Code 21703

Purpose of Disbursement  
PAC PRINTING & MAILING

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 24 2014**Transaction ID : SB21B.272127**

Amount of Each Disbursement this Period

3145.40

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8320.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. STEVEN LAWRENCE**

Mailing Address 7949 OLD DECATUR ROAD

City  
FORT WORTHState  
TXZip Code  
76179Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      02      2014
**Transaction ID : SB21B.280378**

Amount of Each Disbursement this Period

1433.54

Full Name (Last, First, Middle Initial)

**B. BEST BUY**

Mailing Address 3100 14TH ST NW

City  
WASHINGTONState  
DCZip Code  
20010Purpose of Disbursement  
PAC OFFICE EQUIPMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      02      2014
**Transaction ID : SB21B.280379**

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. WALMART**

Mailing Address 4840 SHAWLINE ST.

City  
SAN DIEGOState  
CAZip Code  
92111Purpose of Disbursement  
PAC GIFTCARDS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      02      2014
**Transaction ID : SB21B.280380**

Amount of Each Disbursement this Period

215.76

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1433.54

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. AMAZON

Mailing Address 1516 2ND AVE

City	State	Zip Code
SEATTLE	WA	98101

### Purpose of Disbursement

#### PAC HEADSETS

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Date of Disbursement

Transaction ID : SB21B.280381

Amount of Each Disbursement this Period

217.78

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## B. STEVEN LAWRENCE

Mailing Address 7949 OLD DECATUR ROAD

City	State	Zip Code
FORT WORTH	TX	76179

Purpose of Disbursement
PAC SALARY

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Date of Disbursement

Transaction ID : SB21B.280434

Amount of Each Disbursement this Period

2386.44

Full Name (Last, First, Middle Initial)

**C. BRENDA MCCLUNE**

Mailing Address 117 E. 18TH ST.

City	State	Zip Code
OWENSBORO	KY	42303

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.280402

Amount of Each Disbursement this Period

326.24

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2712.68

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. AT&T INC.**

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement  
PAC INTERNET

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2014

**Transaction ID : SB21B.280403**

Amount of Each Disbursement this Period

299.40
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. ROY NICHOLSON**

Mailing Address 17 SANDWAY DR.

City	State	Zip Code
BRANDON	MS	39042

Purpose of Disbursement  
PAC FIELD CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		17		2014

**Transaction ID : SB21B.280399**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. ROY NICHOLSON**

Mailing Address 17 SANDWAY DR.

City	State	Zip Code
BRANDON	MS	39042

Purpose of Disbursement  
PAC FIELD CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2014

**Transaction ID : SB21B.280411**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
---------

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. NOVA LIST COMPANY

Date of Disbursement

Transaction ID : SB21B.272111

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

1537.81

## B. NOVA LIST COMPANY

Date of Disbursement

Transaction ID : SB21B.272117

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

1001.66

### C. OWENSBORO MUNICIPAL UTILITIES

Date of Disbursement

Transaction ID : SB21B.280383

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

137.21

2676.68



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER      State NY      Zip Code 14625

Purpose of Disbursement  
PAC TAXES

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      30      2014
**Transaction ID : SB21B.280432**

Amount of Each Disbursement this Period

7465.39

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER      State NY      Zip Code 14625

Purpose of Disbursement  
PAC PAYROLL EXPENSES

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      30      2014
**Transaction ID : SB21B.280446**

Amount of Each Disbursement this Period

200.40

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**

Mailing Address 2470 DANIELS BRIDGE RD STE 121

City ATHENS      State GA      Zip Code 30606

Purpose of Disbursement  
PAC COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      14      2014
**Transaction ID : SB21B.280398**

Amount of Each Disbursement this Period

2566.30

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10232.09



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. FACEBOOK

Mailing Address 1 HACKER WAY

City	State	Zip Code
MANLO PARK	CA	94025

### Purpose of Disbursement

#### PAC ADVERTISING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.280459

Amount of Each Disbursement this Period

42.83

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## B. UNITED STATES POSTAL OFFICE

Mailing Address 220 N HATCHER AVE

City	State	Zip Code
PURCELLVILLE	VA	20132

Purpose of Disbursement
PAC POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.280460

Amount of Each Disbursement this Period

19.50

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### C. JIM RYUN

Mailing Address 132 D ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M / D D / Y Y Y Y  
04 29 2014

Transaction ID : SB21B.280427

Amount of Each Disbursement this Period

110.74

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Age Group	Percentage
18-24	110.74
25-34	100.00
35-44	100.00
45-54	100.00
55-64	100.00
65-74	100.00
75-84	100.00
85+	100.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

#### A. UNITED STATES POSTAL OFFICE

Date of Disbursement



Transaction ID : SB21B.280429

00:

Amount of Each Disbursement this Period

Category/  
Type

22.75

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. AT&T INC.**

Date of Disbursement

Mailing Address 208 S AKARD ST

04 / 29 / 2014

Transaction ID : SB21B.280430

00

Amount of Each Disbursement this Period

Category/  
Type

49.50

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**[MEMO ITEM]**

State:  District:

Full Name (Last, First, Middle Initial)

### C. JIM RYUN

Date of Disbursement

Mailing Address 132 D ST SE

Transaction ID : SB21B.280436

00-

Amount of Each Disbursement this Period

Category/  
Type

5223 23

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional).....

5223.23

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

### A. ANDREW RYUN

Date of Disbursement

Transaction ID : SB21B.280435

001

Category/  
Type

Amount of Each Disbursement this Period

5592.62

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**B. ANDREW SCHACHTNER**

Date of Disbursement

04 / 03 / 2014

Transaction ID : SB21B.280385

001

Category/  
Type

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	~10.00
25-34	~15.00
35-44	~20.00
45-54	~25.00
55-64	~30.00
65-74	60.78
75-84	~10.00
85+	~5.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**C. ANDREW SCHACHTNER**

Date of Disbursement

Transaction ID : SB21B.280414

001

Category/  
Type

Amount of Each Disbursement this Period

1750.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7403.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. KRISTOFFER L. SHAFER**Mailing Address 2420 VIA BOLOGNA  
APT. 2428

City FORT WORTH State TX Zip Code 76109

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04 01 2014**Transaction ID : SB21B.280370**

Amount of Each Disbursement this Period

679.46

Full Name (Last, First, Middle Initial)

**B. FACEBOOK**

Mailing Address 1 HACKER WAY

City MANLO PARK State CA Zip Code 94025

Purpose of Disbursement  
PAC ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04 01 2014**Transaction ID : SB21B.280371**

Amount of Each Disbursement this Period

679.46

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. KRISTOFFER L. SHAFER**Mailing Address 2420 VIA BOLOGNA  
APT. 2428

City FORT WORTH State TX Zip Code 76109

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
04 21 2014**Transaction ID : SB21B.280400**

Amount of Each Disbursement this Period

751.26

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1430.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 1 HACKER WAY

City MANLO PARK    State CA    Zip Code 94025

Purpose of Disbursement  
PAC ADVERTISING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04    21    2014
**Transaction ID : SB21B.280401**

Amount of Each Disbursement this Period

751.26

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. KRISTOFFER L. SHAFER**Mailing Address 2420 VIA BOLOGNA  
APT. 2428

City FORT WORTH    State TX    Zip Code 76109

Purpose of Disbursement  
SEE BELOW

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04    24    2014
**Transaction ID : SB21B.280461**

Amount of Each Disbursement this Period

802.61

Full Name (Last, First, Middle Initial)

**C. DELTA**

Mailing Address 1030 DELTA BLVD

City ATLANTA    State GA    Zip Code 30354

Purpose of Disbursement  
PAC AIRFARE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04    24    2014
**Transaction ID : SB21B.280462**

Amount of Each Disbursement this Period

290.00

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

802.61

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

### A. MARRIOTT

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

512.61

[MEMO ITEM]

**B. KRISTOFFER L. SHAFER**

MM / DD / YYYY

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

2619.58

### C. SKYLINE DISPLAYS OF PITTSBURGH

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

1575.18

4194.76



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

#### A. SOUTHWEST PUBLISHING & MAILING

Date of Disbursement



Transaction ID : SB21B.272129

001

Category/  
Type

Amount of Each Disbursement this Period

11119.44

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

## B. ADAM STOCKFORD

Date of Disbursement

04 / 01 / 2014

Mailing Address 163 N MANNING ST

City	State	Zip Code
HILLSDALE	MI	49242

Transaction ID : SB21B.280368

Purpose of Disbursement	PAC FIELD CONSULTING
-------------------------	----------------------

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

735.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

### C. STEVE STRICKLER

Date of Disbursement

Mailing Address 25 SOUTH MAIN ST. 3RD FLOOR

City	State	Zip Code
MANHEIM	PA	17545

Transaction ID : SB21B.280407

Purpose of Disbursement	PAC VIDEO PRODUCTION
-------------------------	----------------------

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3465.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

15319.44

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

### A. SUNRISE DATA SERVICES

Mailing Address 13755 SUNRISE VALLEY DR STE 450

City	State	Zip Code
HERNDON	VA	20171

### Purpose of Disbursement PAC DATA SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Date of Disbursement

Transaction ID : SB21B.272112

Amount of Each Disbursement this Period

2274.09

Full Name (Last, First, Middle Initial)

## B. SUNRISE DATA SERVICES

Mailing Address 13755 SUNRISE VALLEY DR STE 450

City	State	Zip Code
HERNDON	VA	20171

### Purpose of Disbursement PAC DATA SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Date of Disbursement

Transaction ID : SB21B.272118

Amount of Each Disbursement this Period

1075.12

Full Name (Last, First, Middle Initial)

### C. SUNRISE DATA SERVICES

Mailing Address 13755 SUNRISE VALLEY DR STE 450

City	State	Zip Code
HERNDON	VA	20171

### Purpose of Disbursement PAC DATA SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Date of Disbursement

Transaction ID : SB21B.272128

Amount of Each Disbursement this Period

2432.35

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5781.56

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

## A. SURGE DATA TECHNOLOGIES

Date of Disbursement

Transaction ID : SB21B.280389

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

4928.38

## B. SURGE DATA TECHNOLOGIES

Date of Disbursement

04 / 11 / 2014

Transaction ID : SB21B.280395

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

8500.00

### C. SURGE DATA TECHNOLOGIES

Date of Disbursement

Transaction ID : SB21B.280408

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

8500.00

21928.38

[illegible]

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 160

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. THOBURN DESIGN AND ILLUSTRATION LLC**

Mailing Address PO BOX 384

City CLEAR BROOK      State VA      Zip Code 22624

Purpose of Disbursement  
PAC ADVERTISING

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2014
**Transaction ID : SB21B.280375**

Amount of Each Disbursement this Period

390.00

Full Name (Last, First, Middle Initial)

**B. TIME WARNER CABLE**

Mailing Address PO BOX 1060

City CAROL STREAM      State IL      Zip Code 60132

Purpose of Disbursement  
PAC UTILITES

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 02 / 2014
**Transaction ID : SB21B.280382**

Amount of Each Disbursement this Period

1482.55

Full Name (Last, First, Middle Initial)

**C. TIME WARNER CABLE**

Mailing Address PO BOX 1060

City CAROL STREAM      State IL      Zip Code 60132

Purpose of Disbursement  
PAC UTILITIES

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2014
**Transaction ID : SB21B.280431**

Amount of Each Disbursement this Period

309.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2181.55

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

MADISON PROJECT INC.

#### A. TIME WARNER CABLE

04 / 29 / 2014

Transaction ID : SB21B.280424

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

309.00

## B. TRI-STATE ENVELOPE

04 / 03 / 2014

Transaction ID : SB21B.272113

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

3917.66

**C. WASHINGTON INTELLIGENCE BUREAU**

Transaction ID : SB21B.272105

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

4031.46

8258.12

8258.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 160

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2014

Mailing Address 4128 PEPSI PL

City	State	Zip Code
CHANTILLY	VA	20151

**Transaction ID : SB21B.272124**Purpose of Disbursement  
PAC CAGING & ESCROW

001

Amount of Each Disbursement this Period

Candidate Name

3928.39
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3928.39
200901.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 135 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. BEN SASSE FOR US SENATE INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2014

Mailing Address 105 EAST 6TH STREET

City	State	Zip Code
FREMONT	NE	68025

Purpose of Disbursement  
PAC CONTRIBUTION

001

**Transaction ID : SB23.280425**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**BENJAMIN E SASSE**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NE District: 00

Full Name (Last, First, Middle Initial)

**B. BIRMAN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Mailing Address PO BOX 647

City	State	Zip Code
FOLSOM	CA	95763

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

**Transaction ID : SB23.280468**

Amount of Each Disbursement this Period

250.00
--------

Candidate Name

**IGOR A BIRMAN**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 07

Full Name (Last, First, Middle Initial)

**C. BIRMAN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

Mailing Address PO BOX 647

City	State	Zip Code
FOLSOM	CA	95763

Purpose of Disbursement  
EARMARKED BY JOSEPH STURKEY ID# 21273

001

**Transaction ID : SB23.280469**

Amount of Each Disbursement this Period

250.00
--------

Candidate Name

**IGOR A BIRMAN**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 07

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5250.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 137 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. BIRMAN FOR CONGRESS**

Mailing Address PO BOX 647

City  
FOLSOMState  
CAZip Code  
95763Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Candidate Name

**IGOR A BIRMAN**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280500**

Amount of Each Disbursement this Period

5215.00
---------

Full Name (Last, First, Middle Initial)

**B. BIRMAN FOR CONGRESS**

Mailing Address PO BOX 647

City  
FOLSOMState  
CAZip Code  
95763Purpose of Disbursement  
EARMARKED BY CARY KATZ ID# 26365

001

Candidate Name

**IGOR A BIRMAN**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280501**

Amount of Each Disbursement this Period

5200.00
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. BIRMAN FOR CONGRESS**

Mailing Address PO BOX 647

City  
FOLSOMState  
CAZip Code  
95763Purpose of Disbursement  
EARMARKED BY VICTORIA NAGLE ID# 126674

001

Candidate Name

**IGOR A BIRMAN**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280502**

Amount of Each Disbursement this Period

10.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5215.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 139 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641City State Zip Code  
PELHAM AL 35124Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280476**

Amount of Each Disbursement this Period

255.00
--------

Full Name (Last, First, Middle Initial)

**B. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641City State Zip Code  
PELHAM AL 35124Purpose of Disbursement  
EARMARKED BY MICHAEL CASEY ID# 40256

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280477**

Amount of Each Disbursement this Period

25.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641City State Zip Code  
PELHAM AL 35124Purpose of Disbursement  
EARMARKED BY JOHN MCKINNIS ID# 36334

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280478**

Amount of Each Disbursement this Period

25.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 140 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641

City PELHAM State AL Zip Code 35124

Purpose of Disbursement  
EARMARKED BY JONATHAN ORR ID# 126678

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280479**

Amount of Each Disbursement this Period

100.00
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641

City PELHAM State AL Zip Code 35124

Purpose of Disbursement  
EARMARKED BY DAVID FITZWILLIAM ID# 15452

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280480**

Amount of Each Disbursement this Period

10.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641

City PELHAM State AL Zip Code 35124

Purpose of Disbursement  
EARMARKED BY JAMES ROBINSON ID# 126679

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280481**

Amount of Each Disbursement this Period

25.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DR CHAD MATHIS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Mailing Address 2960 PELHAM PKWY  
PO BOX 1641City State Zip Code  
PELHAM AL 35124Purpose of Disbursement  
EARMARKED BY MICHAEL NOTZON ID# 36355

001

**Transaction ID : SB23.280482**

Amount of Each Disbursement this Period

50.00
-------

**[MEMO ITEM]**

Candidate Name

**DR. CHAD MATHIS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Full Name (Last, First, Middle Initial)

**B. DR CHAD MATHIS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

Mailing Address 2960 PELHAM PKWY  
PO BOX 1641City State Zip Code  
PELHAM AL 35124Purpose of Disbursement  
EARMARKED BY CLARO CHEN ID# 26698

001

**Transaction ID : SB23.280483**

Amount of Each Disbursement this Period

20.00
-------

**[MEMO ITEM]**

Candidate Name

**DR. CHAD MATHIS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Full Name (Last, First, Middle Initial)

**C. DR CHAD MATHIS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

Mailing Address 2960 PELHAM PKWY  
PO BOX 1641City State Zip Code  
PELHAM AL 35124Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

**Transaction ID : SB23.280504**

Amount of Each Disbursement this Period

5200.00
---------

Candidate Name

**DR. CHAD MATHIS**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5200.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. DR CHAD MATHIS FOR CONGRESS**Mailing Address 2960 PELHAM PKWY  
PO BOX 1641

City PELHAM State AL Zip Code 35124

Purpose of Disbursement  
EARMARKED BY CARY KATZ ID# 26365

Candidate Name

**DR. CHAD MATHIS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280505**

Amount of Each Disbursement this Period

5200.00
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF BOB JOHNSON**

Mailing Address PO BOX 16401

City SAVANNAH State GA Zip Code 31416

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

Candidate Name

**ROBERT EUGENE MD JOHNSON**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280484**

Amount of Each Disbursement this Period

10.00
-------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF BOB JOHNSON**

Mailing Address PO BOX 16401

City SAVANNAH State GA Zip Code 31416

Purpose of Disbursement  
EARMARKED BY KELLY MARZANO ID# 105532

Candidate Name

**ROBERT EUGENE MD JOHNSON**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280485**

Amount of Each Disbursement this Period

10.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.00
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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
MADISON PROJECT INC.

### A. FRIENDS OF BOB JOHNSON

Date of Disbursement

Transaction ID : SB23.280520

00:

Amount of Each Disbursement this Period

Category/  
Type

ROBERT EUGENE MD JOHNSON

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

State: GA District: 01

Full Name (Last, First, Middle Initial)

### B. FRIENDS OF BOB JOHNSON

Date of Disbursement

MM / DD / YYYY

City	State	Zip Code
SAVANNAH	GA	31416

Transaction ID : SB23.280521

Purpose of Disbursement  
EARMARKED BY TERESA WASSON ID# 8067

00

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

ROBERT EUGENE MD JOHNSON

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

State: GA District: 01

Full Name (Last, First, Middle Initial)

### C. FRIENDS OF CHRIS MCDANIEL

Date of Disbursement

Mailing Address PO BOX 125

City	State	Zip Code
LAUREL	MS	39441

Transaction ID : SB23.280464

## Purpose of Disbursement

### TRANSMITTAL OF EARMARKS

00-

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

CHRISTOPHER BRIAN MCDANIEL

Office Sought:	<input type="checkbox"/>	House
	<input checked="" type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

State: MS District: 00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

110.00











**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF COLONEL ROB MANESS**

Mailing Address PO BOX 25

City MADISONVILLE	State LA	Zip Code 70447
----------------------	-------------	-------------------

Purpose of Disbursement  
EARMARKED BY DON BOGGUS ID# 126677

Candidate Name

**COLONEL ROBERT L MANESS**

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: LA District: 00	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280496**

Amount of Each Disbursement this Period

100.00
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JIM BRIDENSTINE INC**Mailing Address PMB 230  
8086 SOUTH YALE

City TULSA	State OK	Zip Code 74136
---------------	-------------	-------------------

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

Candidate Name

**JAMES FREDERICK BRIDENSTINE**

Office Sought:	Disbursement For: 2014
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: OK District: 01	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280490**

Amount of Each Disbursement this Period

10.00
-------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JIM BRIDENSTINE INC**Mailing Address PMB 230  
8086 SOUTH YALE

City TULSA	State OK	Zip Code 74136
---------------	-------------	-------------------

Purpose of Disbursement  
EARMARKED BY KELLY MARZANO ID# 105532

Candidate Name

**JAMES FREDERICK BRIDENSTINE**

Office Sought:	Disbursement For: 2014
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: OK District: 01	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280491**

Amount of Each Disbursement this Period

10.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 148 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. LOUDERMILK FOR CONGRESS**

Mailing Address PO BOX 447

City CASSVILLE	State GA	Zip Code 30123
-------------------	-------------	-------------------

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Candidate Name

**BARRY LOUDERMILK**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280474**

Amount of Each Disbursement this Period

10.00
-------

Full Name (Last, First, Middle Initial)

**B. LOUDERMILK FOR CONGRESS**

Mailing Address PO BOX 447

City CASSVILLE	State GA	Zip Code 30123
-------------------	-------------	-------------------

Purpose of Disbursement  
EARMARKED BY KELLY MARZANO ID# 105532

001

Candidate Name

**BARRY LOUDERMILK**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280475**

Amount of Each Disbursement this Period

10.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. LOUDERMILK FOR CONGRESS**

Mailing Address PO BOX 447

City CASSVILLE	State GA	Zip Code 30123
-------------------	-------------	-------------------

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

Candidate Name

**BARRY LOUDERMILK**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

**Transaction ID : SB23.280512**

Amount of Each Disbursement this Period

270.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

280.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

MADISON PROJECT INC.

## A. LOUDERMILK FOR CONGRESS

04 / 30 / 2014

Transaction ID : SB23.280513

001

Amount of Each Disbursement this Period

BARRY LOUDERMILK

Category/  
Type

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 11

**[MEMO ITEM]**

## B. LOUDERMILK FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.280514

001

Amount of Each Disbursement this Period

BARRY LOUDERMILK

Category/  
Type

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 11

**[MEMO ITEM]**

### C. LOUDERMILK FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.280515

001

Amount of Each Disbursement this Period

BARRY LOUDERMILK

Category/  
Type

Disbursement For: 2014

☒ Primary ☐ General  
Other (specify) ▼

State: GA District: 11

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. MOONEY FOR CONGRESS**

Mailing Address 151 CAMELOT BLVD

City FALLING WATERS	State WV	Zip Code 25419
------------------------	-------------	-------------------

Purpose of Disbursement  
EARMARKED BY CARY KATZ ID# 26365

Candidate Name

**ALEXANDER XAVIER MOONEY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280509**

Amount of Each Disbursement this Period

5200.00
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. MOONEY FOR CONGRESS**

Mailing Address 151 CAMELOT BLVD

City FALLING WATERS	State WV	Zip Code 25419
------------------------	-------------	-------------------

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

Candidate Name

**ALEXANDER XAVIER MOONEY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

**Transaction ID : SB23.280510**

Amount of Each Disbursement this Period

10.00
-------

Full Name (Last, First, Middle Initial)

**C. MOONEY FOR CONGRESS**

Mailing Address 151 CAMELOT BLVD

City FALLING WATERS	State WV	Zip Code 25419
------------------------	-------------	-------------------

Purpose of Disbursement  
EARMARKED BY TERESA WASSON ID# 8067

Candidate Name

**ALEXANDER XAVIER MOONEY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

**Transaction ID : SB23.280511**

Amount of Each Disbursement this Period

10.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. RATCLIFFE FOR CONGRESS**Mailing Address 2931 RIDGE ROAD SUITE 101  
PMB #217City State Zip Code  
ROCKWALL TX 75032Purpose of Disbursement  
EARMARKED BY KEN MANN ID# 126672

Candidate Name

**JOHN LEE RATCLIFFE**Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

**Transaction ID : SB23.280471**

Amount of Each Disbursement this Period

25.00
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. RATCLIFFE FOR CONGRESS**Mailing Address 2931 RIDGE ROAD SUITE 101  
PMB #217City State Zip Code  
ROCKWALL TX 75032Purpose of Disbursement  
PAC CONTRIBUTION

Candidate Name

**JOHN LEE RATCLIFFE**Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2014

**Transaction ID : SB23.280454**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. RATCLIFFE FOR CONGRESS**Mailing Address 2931 RIDGE ROAD SUITE 101  
PMB #217City State Zip Code  
ROCKWALL TX 75032Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

Candidate Name

**JOHN LEE RATCLIFFE**Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

**Transaction ID : SB23.280522**

Amount of Each Disbursement this Period

10.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2510.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 154 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. RATCLIFFE FOR CONGRESS**Mailing Address 2931 RIDGE ROAD SUITE 101  
PMB #217City State Zip Code  
ROCKWALL TX 75032Purpose of Disbursement  
EARMARKED BY TERESA WASSON ID# 8067

Candidate Name

**JOHN LEE RATCLIFFE**Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2014

**Transaction ID : SB23.280523**

Amount of Each Disbursement this Period

10.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. TAXPAYERS FOR ART HALVORSON COMMITTEE**

Mailing Address P.O. BOX 11

City State Zip Code  
BEDFORD PA 15522Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

Candidate Name

**ARTHUR L HALVORSON**Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280472**

Amount of Each Disbursement this Period

10.00
-------

Full Name (Last, First, Middle Initial)

**C. TAXPAYERS FOR ART HALVORSON COMMITTEE**

Mailing Address P.O. BOX 11

City State Zip Code  
BEDFORD PA 15522Purpose of Disbursement  
EARMARKED BY KELLY MARZANO ID# 105532

Candidate Name

**ARTHUR L HALVORSON**Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2014 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		16		2014

**Transaction ID : SB23.280473**

Amount of Each Disbursement this Period

10.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.00
-------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 155 OF 160

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MADISON PROJECT INC.**

Full Name (Last, First, Middle Initial)

**A. TAXPAYERS FOR ART HALVORSON COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2014

Mailing Address P.O. BOX 11

City	State	Zip Code
BEDFORD	PA	15522

Purpose of Disbursement  
TRANSMITTAL OF EARMARKS

001

**Transaction ID : SB23.280506**

Amount of Each Disbursement this Period

5200.00
---------

Candidate Name

**ARTHUR L HALVORSON**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 09

Full Name (Last, First, Middle Initial)

**B. TAXPAYERS FOR ART HALVORSON COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2014

Mailing Address P.O. BOX 11

City	State	Zip Code
BEDFORD	PA	15522

Purpose of Disbursement  
EARMARKED BY CARY KATZ ID# 26365

001

**Transaction ID : SB23.280507**

Amount of Each Disbursement this Period

5200.00
---------

Candidate Name

**ARTHUR L HALVORSON**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 09

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

--

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5200.00
---------

29590.00
----------

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

MADISON PROJECT INC.

### A. COVENANT CLASSICAL SCHOOL

Date of Disbursement



Transaction ID : SB29.280450

001

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1000.00

**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 157 OF 160  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MADISON PROJECT INC.</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00298000	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee <b>BIRMAN FOR CONGRESS</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 24 / 2014</b>	
Mailing Address <b>PO BOX 647</b>		Amount <b>260.75</b>	
City <b>FOLSOM</b>	State <b>CA</b>	Zip Code <b>95763</b>	Transaction ID : <b>SE.280539</b>
Purpose of Expenditure <b>CC TRANSACTION FEES</b>		Category/Type <b>001</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 24 / 2014</b>
Name of Federal Candidate <b>IGOR A BIRMAN</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>07</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <b>280.00</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>DR CHAD MATHIS FOR CONGRESS</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y <b>04 / 24 / 2014</b>	
Mailing Address <b>2960 PELHAM PKWY</b> <b>PO BOX 1641</b>		Amount <b>260.00</b>	
City <b>PELHAM</b>	State <b>AL</b>	Zip Code <b>35124</b>	Transaction ID : <b>SE.280540</b>
Purpose of Expenditure <b>CC TRANSACTION FEES</b>		Category/Type <b>001</b>	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y <b>04 / 24 / 2014</b>
Name of Federal Candidate <b>DR. CHAD MATHIS</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>AL</b>
Calendar Year-To-Date Per Election for Office Sought <b>277.75</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<b>520.75</b>	
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
MR. PAULA KILGORE		[Electronically Filed]	
Signature		Date M M M / D D D / Y Y Y Y Y Y <b>05 / 20 / 2014</b>	

Full Name of Payee <b>MOONEY FOR CONGRESS</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 30 / 2014</div> </div>	
Mailing Address 151 CAMELOT BLVD		Amount <div> <div>0.50</div> </div>	
City FALLING WATERS	State WV	Zip Code 25419	Transaction ID : <b>SE.280543</b>
Purpose of Expenditure CC TRANSACTION FEES	Category/ Type	001	Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 30 / 2014</div> </div>
Name of Federal Candidate ALEXANDER XAVIER MOONEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	<input checked="" type="checkbox"/> House    District: <u>06</u> <input type="checkbox"/> State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought	<div> <div>4260.50</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶ <table border="1" data-bbox="1102 1650 1364 1656"> <tr><td data-bbox="1102 1650 1364 1656">260.50</td></tr> </table>	260.50
260.50		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶ <table border="1" data-bbox="1102 1656 1364 1661"> <tr><td data-bbox="1102 1656 1364 1661"></td></tr> </table>	
(c) <b>TOTAL</b> Independent Expenditures.....	▶ <table border="1" data-bbox="1102 1661 1364 1669"> <tr><td data-bbox="1102 1661 1364 1669"></td></tr> </table>	

Full Name of Payee <b>TAXPAYERS FOR ART HALVORSON COMMITTEE</b>		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 24 / 2014</div> </div>	
Mailing Address P.O. BOX 11		Amount <div> <div></div> <div>260.00</div> </div>	
City BEDFORD	State PA	Zip Code 15522	Transaction ID : <b>SE.280541</b>
Purpose of Expenditure CC TRANSACTION FEES	Category/ Type	001	Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>04 / 24 / 2014</div> </div>
Name of Federal Candidate ARTHUR L HALVORSON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	<input checked="" type="checkbox"/> House    District: <u>09</u> <input type="checkbox"/> State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought	<div> <div></div> <div>265.50</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	560.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 160 OF 160  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>MADISON PROJECT INC.</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00298000		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span>					
Full Name of Payee <b>UNIVERSAL MEDIA INC.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>		
Mailing Address 4999 LOUISE DR			Amount <span style="border: 1px solid black; padding: 2px;">4000.00</span>		
City <b>MECHANICSBURG</b>		State <b>PA</b>	Zip Code <b>17055</b>		
Purpose of Expenditure <b>ADVERTISING</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Transaction ID : <b>SE.280423</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>	
Name of Federal Candidate <b>ALEXANDER XAVIER MOONEY</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House    District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>MD</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">4260.00</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>VENDYNAMICS</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>		
Mailing Address PO BOX 1295			Amount <span style="border: 1px solid black; padding: 2px;">206.85</span>		
City <b>HOLLISTER</b>		State <b>CA</b>	Zip Code <b>95024</b>		
Purpose of Expenditure <b>PALM CARDS</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">001</span>		Transaction ID : <b>SE.280373</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>	
Name of Federal Candidate <b>THAD COCHRAN</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>MS</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">209.35</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">4206.85</span>		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) <b>TOTAL</b> Independent Expenditures..... ▶			<span style="border: 1px solid black; padding: 2px;">5548.10</span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MR. PAULA KILGORE _____ Signature			[Electronically Filed]    Date <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">20</span> / <span style="border: 1px solid black; padding: 2px;">2014</span>		